

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 194

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Machinists Non Partisan Political League of the International Association of Machinists & Aerospace Workers

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ROGERS, DONNIE, L, ,

Mailing Address 8190 PLEASANT VALLEY RD

City
CAMDENState
OHZip Code
45311-9704FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DISTRICT LODGE 34Occupation (for Individual)
Business Rep/Organizer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 11 / 2020

Transaction ID : 25582482

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SCHNEIDER, RICHARD, L, ,

Mailing Address 3943 SE 30TH AVENUE

City
GRESHAMState
ORZip Code
97080-9293FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
Coordinator Aerospace Department

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 11 / 2020

Transaction ID : 25582483

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RIES, HERBERT, N, ,

Mailing Address 11633 ASBURY CIRCLE # 554

City
SOLOMONSState
MDZip Code
20688-3037FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
Director of Information Systems

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 11 / 2020

Transaction ID : 25582484

Amount of Each Receipt this Period

350.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

900.00

TOTAL This Period (last page this line number only).....▶